

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>ML</i>	<i>32</i>	<i>06-22-01</i>
O.I.P.E. CLASSIFIER	<i>JS</i>		<i>06-22-01</i>
FORMALITY REVIEW	<i>B</i>	<i>TC82</i>	<i>08-10-01</i>
RESPONSE FORMALITY REVIEW	<i>SLB</i>	<i>1091</i>	<i>10-16-01</i>

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	11-6-01
2	12-12-02
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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